State of Itlaho

Ben Ysursa Secretary of State

LOBBYIST ANNUAL REPORT FORM

To be tribed by:

LOBBYISTS (Sec. 67-6619)

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(Type or print See instructions at bottom of page Lubbyist's name and permanent business address Period covered JoAn Condie year ending PO Box 140117 09/11/2006 (Day) (Yr.) (Mo.) Boise, Idaho 83714-0117 2006 06 30 ltem Totals of all reportable expenditures made or incurred by Lobbyist's Employer on behalf of Lobbyist's Employer. Proportionate amounts contributed by each employer (Identify employers, under Category of Expenditure Reimburged Personal Living and Travel *Total Amount for Itum 3, at bettom of page.) Expenses Pertaining to Lobbying Activity All Employees Do Not Have to be Reported Employer No. 1 Employer No. 2 Employer No. 3 Employer No. 4 Entertainment 1,935.31 Food and Refreshment Living Accommodations Advertising Travel 208.99 Telephone 67.04 Other Expenses or Services 2,211.34 0.00 0.00 0.00 0,00 Total *When the number of employers you are reporting for requires sanitiple 1/2 forms to be filed a total amount for all employers should be entered on Page 1. The totals of each expanditure of more than fifty dollars (\$50) for a legislator, other holder of public office, and executive officials. Names of Legislators, Public and Executive Officials in Group Amcont Continued on attached page(s) Item 3 INSTRUCTIONS Employer(s) Namo(s) and Address(es) Idaho State Pharmacy Association Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code PO Box 140117, Boise, Idaho 831714-0117 Filing deadline: Annual report is due on January 31st. No. 2 Executive Lobbist semi-annual report due July 31st. TO BE FILED WITH: No. 3 Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 No. 4 Phone: (208) 334-2852 Fax: (208) 334-2282

Item 4	perso	mal prop				r in the nature of contributions of or for or on behalf of any Logislate			
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